



MAR 08 2005

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/732,322	
	Filing Date	December 7, 2000	
	First Named Inventor	Jens Jensen	
	Art Unit	2128	
	Examiner Name	R. W. Frejd	
Total Number of Pages in This Submission		Attorney Docket Number	05986/000H648-US0

### ENCLOSURES (Check all that apply)

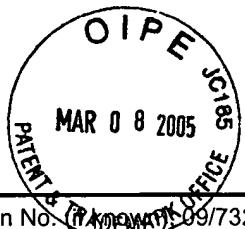
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Supplementary Information Disclosure Statement <i>(w/ PTO/SB/08A61420ef.s)</i> <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Return Receipt Postcard</div>
		Remarks

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	DARBY & DARBY P.C.		
Signature			
Printed name	Walt Thomas Zielinski		
Date	March 8, 2005	Reg. No.	18,902

Express Mail Label No.

Dated: \_\_\_\_\_



Application No. (IPAKDENM/15) 09/732,322

Attorney Docket No.: 05986/000H648-US0

## **Certificate of Express Mailing Under 37 CFR 1.10**

EV330172869-us

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on March 8, 2005  
Date

*Lillian Garcia* Signature  
*Lillian Garcia* Typed or printed name of person signing Certificate

**Registration Number, if applicable**

**Telephone Number**

**Note:** Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)  
IDS (Citation) by Applicant (2 References)  
Supplementary Information Disclosure Statement (2 pages)  
Transmittal Form (1 page)  
Check in the amount of \$180.00  
Amendment (9 pages)  
Return Receipt Postcard